



DECLARATION Utility Application

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original	ginal, first and joint
inventor (if plural names are listed below) of the subject matter which is claimed and for wh	ich a patent is sought on
the invention entitled A SURGICAL RETRACTOR PLATFORM BLADE APPARATU	S the specification of
which	

(Check One)	\boxtimes	is attached hereto OR	
٠.		was filed on as United States Application Serial No	or PC7
		International Application No and was amended on	(if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment(s) referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Date of Filing	Priority Claimed
			Yes No

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s), or § 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date	Status-Patented, Pending or Abandoned
		-	

Send Correspondence to: Kurt T. Mulville	LYON & LYON LLP 633 W Fifth St., Suite 4700	Direct Telephone calls to:	
	Los Angeles, CA 90071	x 1124	

	FULL NAME OF	FIRST Name	MIDDLE Initial	LAST Name	
	INVENTOR	Lawrence	W	Hu	
201	RESIDENCE &	City	State or Foreign Country	Country of Citizenship	
	CITIZENSHIP	Mountain View	CA [·]	USA	
	POST OFFICE	200 East Dana St., Apt.	City	State or	Zip Code
	ADDRESS	- E109	Mountain View	Country	94041
				CA	<u> </u>
	FULL NAME OF	FIRST Name	MIDDLE Initial	LAST Name	
	INVENTOR	David	J	Paul	
202	RESIDENCE &	City	State or Foreign Country	Country of Citiz	enship
202	CITIZENSHIP	Scotts Valley	CA	USA	•
}	POST OFFICE	885 Cadillac Dr.	City	State or	Zip Code
1	ADDRESS	003 Cuamas 21.	Scotts Valley	Country	95066
	ADDIGSO			CA	
<u> </u>	FULL NAME OF	FIRST Name	MIDDLE Initial	LAST Name	
	INVENTOR	Eugene	Edward	Reis	
203	RESIDENCE &	City	State or Foreign Country	Country of Citizenship	
203	CITIZENSHIP	San Jose	CA	USA	•
	POST OFFICE	90 Rankin Ave.	City	State or	Zip Code
	ADDRESS		San Jose	Country	95110
	11001000		1	CA	
	FULL NAME OF	FIRST Name	MIDDLE Initial	LAST Name	
	INVENTOR	Harry	Leonard	Green II	
204	RESIDENCE &	City	State or Foreign Country	Country of Citiz	enship
	CITIZENSHIP	Santa Cruz	CA	USA	
	POST OFFICE	2464 Glen Canyon Rd.	City	State or	Zip Code
	ADDRESS		Santa Cruz	Country	95066
				CA	•
-	FULL NAME OF	FIRST Name	MIDDLE Initial	LAST Name	
1	INVENTOR		·		
205	RESIDENCE &	City	State or Foreign Country	Country of Citizenship	
	CITIZENSHIP				
	POST OFFICE		City	State or	Zip Code
	ADDRESS		•	Country	
		FID CT Maria	MIDDLE Initial	LAST Name	<u> </u>
	FULL NAME OF	FIRST Name	MIDDLE Initial	LAST Name	
206	INVENTOR		State on Familian Countries	Country of Citizenship	
206	RESIDENCE &	City	State or Foreign Country	Country of Citiz	ensmb
	CITIZENSHIP			Chan	7:- 0-1
	POST OFFICE		City	State or	Zip Code
i	ADDRESS			Country	1

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States Code, § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issuing

Date \(\frac{4/27/99}{2.27-79} \) Signature of Inventor \(\frac{202}{2} \) Signature of Inventor \(\frac{2}{2} \)	
Date / 4/27/99 Signature of Inventor 202 Date / 1,-27-79 Signature of Inventor 2	04
	05
Date 4 / 28 / 99 Date	
Signature of Inventor 203 Signature of Inventor 2	06
Date 9-27-89 Date	